Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

		Effe	clive Oct	ober 1, 2	003							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN ENTITY
T	OTAL CLAIM	S .	2	 3]	RATE	FEE	٦	RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC F		OR		
T	OTAL CHARGE	EABLE CLAIMS	23 n	23 minus 20=		- 3		XS 9=	+	OR		54
iΝ	DEPENDENT (CLAIMS	4 .	∠ minus 3 ±		- /		X43=	 	7	X86=	-/-
м	ULTIPLE DEPE	ENDENT CLAIM	PRESENT	RESENT					╅	OR		86
•	f the differenc	column 2 ·		+145=		OR	<u> </u>					
	* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II									OR	TOTAL	9/0
	`	(Column 1)		(Colum	• ••	(Column 3)		SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
Ş	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	- -	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
	1,9,16,20							TOTAL		1	. TOTAL	
		(Column 1)		(Colum	າກ 2)	(Column 3)	A	DDIT. FEE	<u> </u>	1 /	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL - FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** 1		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		Ε .		X43= ·		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			+290=	
				L	TOTAL		OR	TOTAL	•			
		n: 21	(Column 3)	ΑC	DOIT. FEE		OR ,	DDIT. FEE	•			
ပ		(Column 1) CLAIMS REMAINING		(Colum	ST .		Г		ADDI-	·		ADDI-
ENT		AFTER AMENDMENT		PREVIOU PAID FO	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
AMENDMENT	Total		Minus	**		Ξ,		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			OR	+290=	•
. • H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											
!	the "Highest Nur the "Highest Nur	nber Previously Pa mber Previously Pa	id For IN THI id For IN THI	S SPACE IS I	less than less than	20, enter *20.* 3, enter *3.*	•	DIT. FEE	البيد		TOTAL DOIT. FEEL	
. 1	he "Highest Num	ber Previously Paid	For (Total o	r Independen	t) is the l	nighest number	found	in the app	ropriate box	in colu	mn 1. 🛝	

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